

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER	25	04-09-97
EXAMINER	438	17-1-97
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Final	Original	Date
1		1/17/97	
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SYMBOLS

- ✓ Rejected
- ✗ Amend.
- (Through number) Cancelled
- Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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